#### CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION

Please type or print in ink.

Candidate

Election Year: \_

#### **AMENDMENT**

STATEMENT OF ECONOMIC INTERESTS

APR 0 5 2010 COVER PAGE

APR 0 5 2010 COVER PAGE

Document



MAR 3 0 2010

NAME (LAST)	Land Carlotty	(MIDDLE)	DAYTIME TELEPHONE NUMBER
WRIGHT	RODERICK	D	
MAILING ADDRESS STREET (Business Address Acceptable)	CITY	STATE ZIP COD	E OPTIONAL E-MAIL ADDRESS
1 1		THE STATE OF THE SERVICE SERVICES	8000
1. Office, Agency, or 0	Court	4. Schedule Sumn	nary
Name of Office, Agency, or C CALIFORNIA STATE SEN. Division, Board, District, if app 25TH DISTRICT Your Position: ELECTED OFFICIAL  ► If filing for multiple positions position(s): (Attach a sep	s, list additional agency(ies)/ arate sheet if necessary.)	attached schedules:  Schedule A-1  Yes Investments (Less than 10%)  Schedule A-2  Yes	edules or "No reportable sts on one or more of the  - schedule attached Ownership) - schedule attached
		Investments (10% or Greater  Schedule B 🔀 Yes  Reai Property	Ownership) - schedule attached
		Income, Loans, & Busines and Travel Payments)  Schedule D	- schedule attached s Positions (Income Other than Gifts - schedule attached - schedule attached
Other		-	or-
3. Type of Statement	(Check at least one box)	No reportable interes	sts on any schedule
☐ Assuming Office/Initial  ☐ Annual: The period cover	ed is January 1, 2009,	5. Verification  I have used all reasona	able diligence in preparing this
through December 31, 200  O The period covered is _ December 31, 2009.  Leaving Office Date Left	<b>r-</b> , through	statement. I have reviewed my knowledge the informa attached schedules is true  I certify under penalty of p	d this statement and to the best of ation contained herein and in any
(Check one)  O The period covered is a date of leaving office.	anuary 1, 2009, through the	Date Signed	MARCH 26, 2010
O The period covered is the date of leaving office		Signature	signed statement with your fling official.



## Interests in Real Property (Including Rental Income)

### CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION

#### AMENDMENT

STREET ADDRESS OR PRECISE LOCATION	► STREET ADDRESS OR PRECISE LCCATION
868 GLENWAY DRIVE	7627 S. DALTON AVENUE
CITY	CITY
INCLEIMOOD CA 00303	
INGLEWOOD, CA 90302	LOS ANGELES, CA 90047
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$10,001 - \$100,000	\$10,001 - \$100,000 / / 09 / / 09
\$100,091 - \$1,000,000 ACQUIRED DISPOSED	\$100,001 - \$1,000,000 ACQUIRED DISPOSED
Over \$1,000,000	Over \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
Ownership/Deed of Trust     Easement	■ Ownership/Deed of Trust     ■ Easement
Leasehold	Leasehold
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
\$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000	\$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000
▼ \$10,001 - \$190,000	S10,001 - \$100,000 OVER \$100,000
SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each lenant that is a single source of income of \$10,000 or more.	SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.
You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:	
NAME OF LENDER*	Verification
ADDRESS (Business Address Acceptable)	Print Name RODERICK D. WRIGHT
nounced paramoss narross naceptable)	Office, Agency CA STATE SENATE
DIRENTES ACTIVITY IS ANY OF LEVELE	or Court CASTATE SENATE
BUSINESS ACTIVITY, IF ANY, OF LENDER	Statement Type 2009/2010 Annual Assuming Leaving Candidate
INTEREST RATE TERM (Months/Years)	I have used all reasonable diligence in preparing this statement, I have
%	reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.
HIGHEST BALANCE DURING REPORTING PERIOD  [ \$590 - \$1,000   \$1,001 - \$10,000	I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.
\$10,001 - \$100,000 OVER \$100,000	Date Signed MARCH 26, 2010
	Date Signed
Guarantor, if applicable	Signature
	FPPC Form 700 Amendment (2009/2010) Sch. B FPPC Toll-Free Helpline: 866/ASK-FPPC

#### **CALIFORNIA FORM** FAIR POLITICAL PRACTICES COMMISSION

#### STATEMENT OF ECONOMIC INTERESTS

(MIDDLE)

D

STATE

PRACTICES COCOVER PAGE

10 Mar 25<sub>A</sub> Public Document



ZIP CODE

Date Received Official Use Only

MAR 2 4 2010

TIONAL E-MAIL ADDRESS

DAYTIME TELEPHONE NUMBER



#### AMENDMENT

Please type or print in ink.

NAME (FIRST) (LAST) RODERICK WRIGHT MAILING ADDRESS STREET CITY (Business Address Acceptable) 1. Office, Agency, or Court Name of Office, Agency, or Court: CALIFORNIA STATE SENATE Division, Board, District, if applicable: 25TH DISTRICT Your Position: **ELECTED OFFICIAL** ▶ If filing for multiple positions, list additional agency(ies)/ position(s): (Attach a separate sheet if necessary.) Agency: \_\_\_\_\_ Position: .... 2. Jurisdiction of Office (Check at least one box) X State County of \_\_\_\_\_ City of \_\_\_\_\_ Multi-County \_\_\_\_\_ Other \_\_\_ 3. Type of Statement (Check at least one box) Assuming Office/Initial Date: \_\_\_\_/\_\_\_ Annual: The period covered is January 1, 2009, through December 31, 2009. -or-O The period covered is \_\_\_\_\_\_\_\_ through December 31, 2009. Leaving Office Date Left: \_\_\_\_/\_\_\_ (Check one) O The period covered is January 1, 2009, through the date of leaving office. O The period covered is \_\_\_\_/\_\_\_ through the date of leaving office. Candidate Election Year: \_\_\_

4. Schedule Summary		
► Total number of pages including this cover page:		
► Check applicable schedules or "No reportable interests."		
I have disclosed interests on one or more of the attached schedules:		
Schedule A-1 Yes – schedule attached  Investments (Less than 10% Ownership)		
Schedule A-2 Yes – schedule attached  Investments (10% or Greater Ownelship)		
Schedule B Yes – schedule attached Real Property		
Schedule C		
Schedule D Yes – schedule attached Income – Gifts		
Schedule E 🔀 Yes – schedule attached Income – Travel Payments		
-or-		
No reportable interests on any schedule		

#### 5. Verification

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed .

MARCH 23, 2010

Signature

S 100

(File the originally signed statement with your filing official.)

FPPC Form 700 Amendment (2009/2010) FPPC Toll-Free Helpline: 866/ASK-FPPC



#### SCHEDULE E Income – Gifts Travel Payments, Advances, and Reimbursements

- Reminder you must mark the gift or income box.
- · You are not required to report income from government agencies.

NAME OF SOURCE	► NAME OF SOURCE
City of Los Angeles-Legislative & Gov't Affairs	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
1400 K Street, Room 208	W
CITY AND STATE	CITY AND STATE
Sacramento, CA 95814	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE(S): 01 / 04 / 09 - 12 / 17 / 09 AMT: \$ 600.00	DATE(S):
TYPE OF PAYMENT: (must check one) 🔀 Gift 🔲 Income	TYPE DF PAYMENT: (must check one)
DESCRIPTION: LAX parking and shuttle services	DESCRIPTION:
NAME OF SCURCE	Verification
ADDRESS (Business Address Acceptable)	Print Name RODERICK D. WRIGHT
CITY AND STATE	Office, Agency CA STATE SENATE
BUSINESS ACTIVITY, IF ANY, OF SOURCE	Statement Type  2009/2010 Annual  Assuming Leaving  Annual  Candidate
	I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information
DATE(S):	contained herein and in any attached schedules is true and complete.
in approau <del>s</del> ;	California that the foregoing is true and correct.
TYPE OF PAYMENT: (must check one)   Gift Income	Pate Signed MARCH 23, 2010
	Date Signed INARCH 20, 2010
DESCRIPTION:	
	Signature
Comments:	

#### **CALIFORNIA FORM** FAIR POLITICAL PRACTICES COMMISSION

### STATEMENT OF ECONOMIC INTERESTS

Date Received Official Use Only

#### **COVER PAGE**

PM 5: 14 A Public Document

Please type or print in link NAME (FIRST) (MIDDLE) (LAST) DAYTIME TELEPHONE NUMBER **WRIGHT RODERICK DEVON** STATE ZIP CODE PTIONAL: E-MAIL ADDRESS

(Business Address Acceptable)	· · · · · · · · · · · · · · · · · · ·
(Danies Annies Pergraph)	A 12.
1. Office, Agency, or Court	7
Name of Office, Agency, or Court:	
CA STATE LEGISLATURE	
Division, Board, District, if applicable:	
STATE SENATE, 25TH DISTRICT	
Your Position:	
ELECTED OFFICIAL-SENATOR	
➤ If filing for multiple positions, list additional agency(ies)/i position(s): (Attach a separate sheet if necessary.)	
Agency:	
Position:	
2. Jurisdiction of Office (Check at least one box)	
<b>☒</b> State	
County of	
City of	
Multi-County	
Other	
3. Type of Statement (Check at least one box)	7
Assuming Office/Initial Date://	
Annual: The period covered is January 1, 2009, through December 31, 2009.	
-or-	
O The period covered is/, through December 31, 2009.	
Leaving Office Date Left://(Check one)	
O The period covered is January 1, 2009, through the date of leaving office.	
-or-	
O The period covered is/, through the date of leaving office.	
Candidate Election Year:	İ

4. Schedule Summary		
► Total number of pages including this cover page:		
➤ Check applicable schedules or 'No reportable interests."  I have disclosed interests on one or more of the attached schedules:		
Schedule A-1 Yes - schedule attached Investments (tess than 10% Ownership)		
Schedule A-2 Yes ~ schedule attached Investments (10% or Greater Ownership)		
Schedule B 🔀 Yes – schedule attached Real Property		
Schedule C		
Schedule D 🔀 Yes – schedule attached Income – Gilis		
Schedule E		
-or-		
No reportable interests on any schedule		
5. Verification		

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

FEBRUARY 22, 2010 Date Signed (menth, day, year) Signature TFile the originally signed

### SCHEDULE B Interests in Real Property (Including Rental Income)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION	
Name	•
RODERICK D. WRIGHT	

STREET ADDRESS OR PRECISE LOCATION	► STREET ADDRESS OR PRECISE LOCATION
868 GLENWAY DRIVE	7627 S. DALTON AVENUE
CITY	CITY
INGLEWOOD, CA 90302	LOS ANGELES, CA 90047
FAIR MARKET VALUE  \$2.000 - \$10.000  \$100.001 - \$100.000  \$100.001 - \$1.000.000  ACQUIRED  DISPOSED  Over \$1,000,000	FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:   \$2,000 - \$10,000
NATURE OF INTEREST	NATURE OF INTEREST
Ownership/Deed of Trust Easement	Ownership/Deed of Trust Easement
i_easehold	Leasehold
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
\$0 - \$499	\$0 - \$499
S10,001 - \$100,000 OVER \$100,000	☐ \$10,001 - \$100,000 ☐ OVER \$100,000
SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.  MICHA GREEN	SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.
WANDA SANDERS	
	lending institutions made in the lender's regular course olic without regard to your official status. Personal loans f business must be disclosed as follows:
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF LENDER	BUSINESS ACTIVITY, IF ANY, OF LENDER
INTEREST RATE TERM (Months/Years)	INTEREST RATE YERM (Months/Years)
% None	%
HIGHEST BALANCE DURING REPORTING PERIOD	HIGHEST BALANCE DURING REPORTING PERIOD
S500 - \$1,000	S500 - \$1,000 [] \$1,001 - \$10,000
S10,001 - \$100,000 OVER \$100,000	S10,601 - \$100,000 OVER \$100,000
Guarantor, if applicable	Guarantor, if applicable
Guarantor, if applicable	∐ Guarantor, if applica≒le

### SCHEDULE B Interests in Real Property (Including Rental Income)

CALIFORNIA FORM	
Name	JWW822IOM

RODERICK D. WRIGHT

► STREET ADDRESS OR PRECISE LOCATION	L OFFICE LOOPEGE OF SPECIAL LOOPEGE
1	► STREET ADDRESS OR PRECISE LOCATION
4556 DON MILAGRO DRIVE	
CITY	CITY
LOS ANGELES, CA 90008	
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  \$2,000 \ \$10,000 \ \$10,001 \ \$100,000 \ \$100,001 \ \$1,000,000 \ Over \$1,000,000 \  Over \$1,000,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  \$2,000 - \$10,000  \$10,001 - \$100,000  \$100,001 - \$1,000,000  Over \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
Ownership/Deed of Trust	Ownership/Deed of Trust Easement
t.easehold	LeaseholdOther
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
\$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000	\$0 - \$499 \ \\$500 - \$1.000 \ \\$1,001 - \$10,000
S10,001 - \$100,000 OVER \$100,000	S10,001 - \$100,000 DVER \$100,000
SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.	SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.
You are not required to report loans from commercial le of business on terms available to members of the publi and loans received not in a lender's regular course of le	ic without regard to your official status. Personal loans business must be disclosed as follows:
of business on terms available to members of the publi	ic without regard to your official status. Personal loans
of business on terms available to members of the publi and loans received not in a lender's regular course of t	ic without regard to your official status. Personal loans business must be disclosed as follows:
of business on terms available to members of the public and loans received not in a lender's regular course of the NAME OF LENDER*	ic without regard to your official status. Personal loans business must be disclosed as follows:  NAME OF LENDER*
of business on terms available to members of the public and loans received not in a lender's regular course of the NAME OF LENDER*  ADDRESS (Business Address Acceptable)	ic without regard to your official status. Personal loans business must be disclosed as follows:  NAME OF LENDER*  ADDRESS (Business Address Acceptable)
of business on terms available to members of the public and loans received not in a lender's regular course of lender's regular c	ic without regard to your official status. Personal loans business must be disclosed as follows:  NAMF. OF LENDER*  ADDRESS (Business Address Acceptable)  BIJSINESS ACTIVITY, IF ANY, OF LENDER
of business on terms available to members of the public and loans received not in a lender's regular course of loans of of	ic without regard to your official status. Personal loans business must be disclosed as follows:  NAME. OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE TERM (Months/Years)
of business on terms available to members of the public and loans received not in a lender's regular course of lender's regular c	ic without regard to your official status. Personal loans business must be disclosed as follows:  NAME. OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE. TERM (Months/Years)
of business on terms available to members of the public and loans received not in a lender's regular course of loans received not in a lender's regular course of loans received not in a lender's regular course of loans and loans received not in a lender's regular course of loans and loans received not in a lender's regular course of loans and loans received not in a lender's regular course of loans and loans received not in a lender's regular course of loans and loans received not in a lender's regular course of loans and loans received not in a lender's regular course of loans and loans received not in a lender's regular course of loans and loans received not in a lender's regular course of loans and loans received not in a lender's regular course of loans and loans received not in a lender's regular course of loans loans and loans received not in a lender's regular course of loans loans loans and loans received not loans and loans received not loans	ic without regard to your official status. Personal loans business must be disclosed as follows:  NAME. OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE. TERM (Months/Years)

# SCHEDULE D Income - Gifts

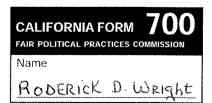


Name

Roderick D. Wright

NAME OF SOURCE	NAME OF SOURCE
Southern California Edison	CA Foundation on the Environment and the Economy
ADDRESS (Business Andress Acceptable)	ADDRESS (Business Address Acceptable)
2244 Walnut Grove Avenue, Rosemead, CA 91770	Pier 35, Suite 202, San Francisco, CA 94133
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Lobbyist Employer	
DATE (mm/dd/yy) VAI.UE DESCRIPTION OF GIFT(S)	DATE (min/dd/yy) VALUE DESCRIPTION OF CIFT(S)
12 17 09 s 16.50 holiday ornament	09 , 23 , 09 s 50.00 delegation gift
s	ss
NAME OF SOURCE	► NAME OF SOURCE
The Walt Disney Company	Barona Band of Mission Indians
ADDRESS (Business Address Acceptable)	ADORESS (Business Address Acceptable)
500 S. Buena Vista Street, Burbank, CA 91521-0736	1095 Barona, Lakeside, CA 92040-1599
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE (mm/od/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (inm/ad/yy) VALUE DESCRIPTION OF GIFT(S)
12 / 24 / 09 s 378.00 Disneyland Resort tix	10 / 26 / 09 s 159.07 hotel room & meal
	\$
NAME OF SOURCE	► NAME OF SOURCE
Pacific Gas and Electric Company	CA Cable and Telecommunications Association
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
1415 L Street, Suite 280, Sacramento, CA 95814	1001 K Street, 2nd Floor, Sacramento, CA 95814
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Lobbyist Employer	Lobbyist Employer
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(\$)
01 , 19 , 09 s 159.37 dinner at Morton's	12 , 01 , 09 s 40.00 dinner
04 , 16 , 09 s 18.97 lunch @ Diablo Canyo	08 , 26 , 09 s 22.28 open house reception
Comments:	

# SCHEDULE D Income - Gifts



NAME OF SOURCE	► NAME OF SOURCE	
CA Correctional Peace Officers Association	Verizon	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)	
1415 L Street, Sacramento, CA 95814	1201 K Street, Suite 960, Sacramento, CA 95814	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE	
DATE (mini/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	
11 / 16 / 09 s 56.18 dinner	11 / 24 / 09 s 213.55 NBA tix food & bevera	
NAME OF SOURCE	NAME OF SOURCE	
CA Distributors Association	CA Association of Winegrape Growers	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)	
1215 K Street, Suite 1500, Sacramento, CA 95814	1325 J Street, Suite 1560, Sacramento, CA 95814	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE	
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	
04 / 10 / 09 s 87.20 dinner in La Quinta	03 , 04 , 09 s 12.68 breakfast reception	
	06 / 17 / 09 s 47.00 (2) bottles of wine	
NAME OF SOURCE	► NAME OF SOURCE	
Comcast Corporation	CA Building Industry Association	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)	
1415 L Street, Sacramento, CA 95814	1215 K Street, Sacramento, CA 95814	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE	
DATE (mm/dd/yy) VAI.UE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	
06 / 16 / 09 <sub>\$</sub> 39.92 reception	04 , 15 , 09 s 93.75 Leg. dinner	
\$		
Comments:		

# SCHEDULE D Income - Gifts

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name

Roderick D. Wright

Del Mar Thoroughbred Club  ADDRESS (Business Address Acceptable)  P.O. Box 700 Del, Mar, CA 92014-0700  BIJSINESS ACTIVITY, IF ANY, OF SOURCE  DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)  07 / 22 / 09 s 255.00 opening day event	ALL ALL ALL CONTROL	AND OF SOURCE
ADDRESS (Business Address Acceptable)  P.O. BOX 700 Del, Mar, CA 92014-0700  Business Activity, if Any, OF SOURCE  DATE (immigraty): VALUE	NAME OF SOURCE	NAME OF SOURCE
P.O. Box 700 Del, Mar, CA 92014-0700  8USINESS ACTIVITY, IF ANY, OF SOURCE  DATE (remidalry): VALUE DESCRIPTION OF GIFTIS)  07 , 22 , 09		
BUSINESS ACTIVITY, IF ANY, OF SOURCE  DATE (mm/ddyy) VALUE DESCRIPTION OF GIFT(S)  O7 , 22 , 09	ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)  07 , 22 , 09	P.O. Box 700 Del, Mar, CA 92014-0700	
1	BIJSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
1		
NAME OF SOURCE  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF SOURCE  DATE (mm/addyy) VALUE DESCRIPTION OF GIFT(S)  S  NAME OF SOURCE  DATE (mm/addyy) VALUE DESCRIPTION OF GIFT(S)  S  NAME OF SOURCE  DATE (mm/addyy) VALUE DESCRIPTION OF GIFT(S)  S  NAME OF SOURCE  DATE (mm/addyy) VALUE DESCRIPTION OF GIFT(S)  S  J S  J S  J S  J S  J S  J S  J S	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/ad/yy) VALUE DESCRIPTION OF GIFT(S)
NAME OF SOURCE  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF SOURCE  DATE (mm/addyy) VALUE DESCRIPTION OF GIFT(S)  S  NAME OF SOURCE  DATE (mm/addyy) VALUE DESCRIPTION OF GIFT(S)  S  NAME OF SOURCE  DATE (mm/addyy) VALUE DESCRIPTION OF GIFT(S)  S  NAME OF SOURCE  DATE (mm/addyy) VALUE DESCRIPTION OF GIFT(S)  S  J S  J S  J S  J S  J S  J S  J S	07 22 09 255.00 opening day event	
	or 22 00 s 200.00 Opening day event	\$
NAME OF SOURCE  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF SOURCE  DATE (mmiddfyy) VALUE DESCRIPTION OF GIFT(S)	\$	\$
NAME OF SOURCE  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF SOURCE  DATE (mmiddfyy) VALUE DESCRIPTION OF GIFT(S)	/ / *	1 / 0
ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF SOURCE  DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)  J S DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)  ADDRESS (Business Address Acceptable)  DATE (mm/dd/yy): VALUE DESCRIPTION OF GIFT(S)  J S S SOURCE  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF SOURCE  DATE (mm/dd/yy): VALUE DESCRIPTION OF GIFT(S)  J J S S S S S S S S S S S S S S S S S		
BUSINESS ACTIVITY, IF ANY, OF SOURCE  DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	NAME OF SOURCE	► NAME OF SOURCE
BUSINESS ACTIVITY, IF ANY, OF SOURCE  DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)		
DATE (mm/dd/yy)         VALUE         DESCRIPTION OF GIFT(S)	ADDRESS (Business Address Acceptable)	ADDRESS (Busiriess Address Acceptable)
DATE (mm/dd/yy)         VALUE         DESCRIPTION OF GIFT(S)		
	BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
J   S   J   S   J   S   J   J   S   J   J		\$
J   S   J   S   J   S   J   J   S   S		
NAME OF SOURCE  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF SOURCE  DATE (mmirld/yy) VALUE DESCRIPTION OF GIFT(S)  DATE (mmirld/yy) VALUE DESCRIPTION OF GIFT(S)  DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)  DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)  DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)		\$
NAME OF SOURCE  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF SOURCE  DATE (mmirld/yy) VALUE DESCRIPTION OF GIFT(S)  DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	1 1 5	
ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF SOURCE  BUSINESS ACTIVITY, IF ANY, OF SOURCE  DATE (mmirid/yy) VALUE DESCRIPTION OF GIFT(S)  J. J. S. J. J. J. J. S. J. J. J. J. S. J. J. J. S. J. J. J. J. J. S. J. J. J. J. S. J. J. J. J. J. S. J. J. J. J. S. J. J. J. J. S. J. J. J. J. J. J. J. S. J.		
BUSINESS ACTIVITY, IF ANY, OF SOURCE         BUSINESS ACTIVITY, IF ANY, OF SOURCE           DATE (mm/rld/yy)         VALUE         DESCRIPTION OF GIFT(S)          //	NAME OF SOURCE	NAME OF SOURCE
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